## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

**CLAIMS AS FILED - PART I** 

Application or Docket Number

10991775-5

CLAIMS AS FILED - PART I (Column 1) (Column 2)						mn 2)	SMALI TYPE	SMALL ENTITY TYPE  OF			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			13				RAT	E	FEE	) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC		375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			//3 minus 20=		* (j)		X\$ 9	=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		* 0		X42	=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				+140	=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ro, enter	"0" in column 2		TOTA	۸L		OR	TOTAL	750
	C	LAIMS AS A	MENDED					SMALL ENTITY		OD	OTHER THAN SMALL ENTITY	
		(Column 1) CLAIMS	<b>"</b>	(Colur HIGH		(Column 3)	AMIC	- L I		OR I	SIVIALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus ***  TATION OF MULTIPLE DEPENDEN		T CL AIM	=	X42	=		OR	X84=	
THIS THESE THAT OF MISE IN ELECTION COMMITTEE SET ENDERT CERTIFIC								=		OR	+280=	
								TAL		OR	TOTAL ADDIT. FEE	
		ADDIT. F	-C	•								
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUM PREVIO PAID	HEST IBER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL A114	=	X42	=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								=		OR	+280=	
							TO Addit. F	TAL		OB.	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)									-	•	ADDN. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT			IBER OUSLY	PRESENT EXTRA	RAT	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	* .	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	* ENTATION OF M	Minus	***	T CL AIM	=	X42:	-		OR	X84=	
_	TINOT FRESE	INTAHON OF M	OCHIPLE DEI	LINDEN	CLAIN		+140	=		OR	+280=	
		ımn 1 is less than t ımber Previously P					TO				TOTAL	
***	'If the "Highest Nu	umber Previously Pa mber Previously Pa	Paid For" IN THI	IS SPACE	is less tha	an 3, enter "3."	AUUII. I		propriate bo	,	ADDIT. FEE lumn 1.	